| TRANSMITTAL | ←→ 🛨 | | | HDP/SB/21 based on PTO/SB/21 (08 |
|--|--|---|---|---|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | Applica | ati n Number | 09/998,069 |
| | | Filing [| Dat | 11/30/2001 |
| | | First Named Inv nt r Scott Carleton Sanner | | |
| | | Group Art Unit 2833 | | |
| | | Examin | er Name | James Harvey |
| Total Number of Pages in This Submission | n 26 | Attorne | y Docket Number | 7784-000302/CPA |
| | ENCLO | SURES (| (check all that apply) | |
| Fee Transmittal Form | Assignment Papers (for an Application) | | | After Allowance Communication to Group |
| Fee Attached Drav | | Drawing(s) | | Appeal Communication to Board of Appeals and Interferences |
| | | ng-related Papers | | Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| After Final | Petition | 1 | | Proprietary Information |
| Affidavits/declaration(s) | | to Conve | | Status Letter |
| | | Power of Attorney, Revocation Change of Correspondence Address | | Other Enclosure(s) (please identify below): |
| _ | Terminal Disclaimer | | ner | HDP Form 1449; |
| Express Abandonment Request | Request for Refund | | nd | and Return-Receipt Postcare |
| Information Disclosure Statement | CD, Nu | CD, Number of CD(s) | | |
| Certified Copy of Priority Document(s) | | | The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CPB 1.16 or 1 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed. | |
| Response to Missing Parts/ Incomplete Application Response to Missing | | | onest is cholosed. | MOLOGY C |
| Parts under 37 CFR 1.52 or 1.53 | | | | E |
| SIGNA | TURE OF A | PPLICA | NT, ATTORNEY, O | R AGENT |
| Firm or Harness, Dickey 8 Individual name | Pierce, P.L. | Attor Thor | rney Name mas J. Krul | R AGENT Reg. No. 46,842 |
| Signature | | 2 | | |
| Date | Juni | E 20 | 6,2003 | |
| | | | AILING/TRANSMISS | SION |

Typed or printed name Thomas J. Krul Signature

Date

Juse 26, 2003